GENERAL STUDENT CERTIFICATION LETTER

Please be sure to fill this form out completely and include all requested information.

Name_____SSN_____

Graduate Undergraduate (circle one) If a graduate student, please indicate: Masters PhD (circle one)

Major/Program of Study_____

Date studies at WSU began_____
(first date on line 5 of SEVIS I-20)

Date studies will be completed_____
(second date on line 5 of SEVIS I-20)

Indicate current quarter and number of credit hours you are registered for_____

_____

If you are pre-registered for classes next quarter, please indicate the quarter and number of credit hours_____

Optional: You may also request a Financial Cost Verification. Please fill out the application completely and provide the additional information:

Estimated average costs (line 7 of SEVIS I-20):

a. Tuition and fees $_____
b. Living expenses $_____
c. Expenses of dependents $_____
d. Other (books and health) $_____

(Student signature) (Date)

Please be sure to allow 3 business days for your certification to be processed.